

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF NEW YORK

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:
In re: : Chapter 7
:
Honors Holdings, LLC, : Case No. 24-44875 (ESS)
:
Debtor. :
:
----- X

**STATEMENT REGARDING THE DEBTOR'S PETITION, SCHEDULES OF ASSETS
AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS**

On November 20, 2024 (the “Petition Date”), petitioning creditors Core2000 LLC, BOTF, LLC, and CA 531 86th Street LLC (the “Petitioning Creditors”) filed an involuntary chapter 7 petition [Docket No. 1] (the “Involuntary Chapter 7 Case”) against the Honors Holdings, LLC (the “Debtor”) in the United States Bankruptcy Court for the Eastern District of New York (the “Court”). On February 25, 2025, the Debtors and the Petitioning Creditors filed a stipulation pursuant to which, among other things, the Debtor agreed to consent to the entry of the Order for Relief and withdraw its Motion to Dismiss [Docket No. 20]. On February 27, 2025 (the “Voluntary Chapter 7 Conversion Date”), the Court entered the Order for Relief [Docket No. 22].

On March 4, 2025 the United States Trustee appointed Lori Lapin Jones as chapter 7 trustee (the “Chapter 7 Trustee”). On March 5, 2025, the Court requested the Debtor to file a voluntary petition along with its Schedule of Assets and Liabilities (the “Schedules”) and Statement of Financial Affairs (the “Statement”). The Debtor, with the assistance of its legal advisors, concurrently is filing the Petition, which is attached hereto as Exhibit A, the Schedules and Statement in accordance with section 521 of title of the United States Code (the “Bankruptcy Code”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “Rules”).¹

Grant Lyon has signed the Petition, Schedules and Statements as the Independent Manager and an authorized signatory for the Debtor. In reviewing and signing the Petition, Schedule and Statement, Mr. Lyon has necessarily relied upon the efforts, statements, advice, and representations of personnel of the Debtor and the Debtor’s advisors. In preparing the Petition, Schedules and Statement, the Debtor relied on financial data derived from its books and records that was available at the time of such preparation. Although the Debtor has made a reasonable effort to ensure the accuracy and completeness of the Schedules and Statement, subsequent information or discovery may result in material changes to the Schedules and Statement. As a result, inadvertent errors or omissions may exist. For the avoidance of doubt, the Debtor hereby reserves its rights to amend and supplement the Schedules and Statement as may be necessary or appropriate.

¹ Given that the Order for Relief has already been entered, the Debtor did not separately file the Petition to avoid confusion.

Notably, the Petition and the Schedules and Statement only pertain to the Debtor. In its recent history, the Debtor was a holding company for 193 subsidiaries, which are not the subject of this chapter 7 case. Accordingly, with respect to **Statement, Part 1, Question 1 – Gross Revenue from Business**, the Debtor responds “None” because it did not generate any gross revenue on an individual basis. However, on a consolidated basis, the enterprise did generate gross revenue. The consolidated financial statements will be made available to the Chapter 7 Trustee promptly (to the extent such financial statements have not already been provided to the Trustee).

Likewise, historically, the Debtor’s subsidiary, HH Accounts Payable LLC, made all payments on the Debtor’s behalf. Because HH Accounts Payable LLC is not a debtor in this case, the Debtor’s response to **Statement, Part 2, Question 3 – Payments to Certain Creditors** may not reflect all of the payments made by HH Accounts Payable, LLC. To the extent not already provided, the Debtor will provide the Chapter 7 Trustee with information related to all payments made by HH Accounts Payable, LLC both prior to and after the filing of the Involuntary Petition.

EXHIBIT A

Chapter 7 Petition

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Eastern District of NY
(State)
Case number (if known): 24-44875 (ESS) Chapter 7

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/24

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	Honors Holdings, LLC		
2. All other names debtor used in the last 8 years			
Include any assumed names, trade names, and <i>doing business as</i> names			
3. Debtor's federal Employer Identification Number (EIN)	4 7 - 1 1 8 0 4 5 9		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	120 Interstate Parkway SE	Number	Street
	Atlanta GA 30339	City	State ZIP Code
	Fulton	Location of principal assets, if different from principal place of business	
	County	Number	Street
5. Debtor's website (URL)	<u>www.honorsholdings.com</u>		

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
 Partnership (excluding LLP)
 Other. Specify: _____

7. Describe debtor's business

A. Check one:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. § 101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. § 781(3))
 None of the above

Holding company for fitness facility subsidiaries.

B. Check all that apply:

Tax-exempt entity (as described in 26 U.S.C. § 501)
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
 Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

Chapter 7
 Chapter 9
 Chapter 11. Check all that apply:

Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).
 The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

No
 Yes. District EDNY When 11/20/2024 Case number 24-44875 (ESS)
MM / DD / YYYY

If more than 2 cases, attach a separate list.

District _____ When _____ Case number _____
MM / DD / YYYY

Debtor	Honors Holdings, LLC		Case number (if known)	24-44875 (ESS)
Name				
10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Debtor _____ Relationship _____ District _____ When _____ Case number, if known _____ List all cases. If more than 1, attach a separate list.		

11. Why is the case filed in this district?		Check all that apply:		
		<input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.		

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.		
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Why does the property need immediate attention? (Check all that apply.)

- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- It needs to be physically secured or protected from the weather.
- It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- Other _____

Where is the property?

Number _____ Street _____

City _____ State ZIP Code _____

Is the property insured?

- No
- Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds		Check one:		
		<input type="checkbox"/> Funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.		
14. Estimated number of creditors		<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000

Debtor	Honors Holdings, LLC		
	Name		
	Case number (if known) 24-44875 (ESS)		
15. Estimated assets	<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion
16. Estimated liabilities	<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input type="checkbox"/> \$100,001-\$500,000	<input checked="" type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03 07/2025
MM / DD / YYYY

/s/ G. Grant Lyon

Signature of authorized representative of debtor

G. Grant Lyon

Printed name

Title Independent Manager

18. Signature of attorney

/s/ Brian S. Lennon

Signature of attorney for debtor

Date 03 07/2025

MM / DD / YYYY

Brian S. Lennon

Printed name

Willkie Farr & Gallagher LLP

Firm name

787 Seventh Avenue

Number Street

New York

NY 10019

City

State ZIP Code

(212) 728-8000

blennon@willkie.com

Contact phone

Email address

4215083

NY

Bar number

State

Fill in this information to identify the case:

Debtor name	Honors Holdings,LLC		
United States Bankruptcy Court for the:	Eastern	District of	NY (State)
Case number (If known):	24-44875 (ESS)		

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
2. Cash on hand			\$ 0.00
3. Checking, savings, money market, or financial brokerage accounts (Identify all)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. JP Morgan Chase NA	Checking	5 3 2 1	\$ 0.00
3.2. _____	_____	_____	\$ _____
4. Other cash equivalents (Identify all)			
4.1. _____			\$ _____
4.2. _____			\$ _____
5. Total of Part 1			\$ _____

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.
 Yes. Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	Current value of debtor's interest
7.1. Lease security deposit held by Albany Road - 120 Interstate North LLC	\$ 6,666.81
7.2. _____	\$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____	\$ _____
8.2. _____	\$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less: _____	-	face amount _____	= →	\$ _____
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11b. Over 90 days old: _____	-	face amount _____	= →	\$ _____
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12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments**13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.

Valuation method used for current value
--

Current value of debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. JM Smithfield LLC	100	%	Unknown	\$ Undetermined
15.2. VVDC Lawrenceville LLC	100	%	Unknown	\$ Undetermined

(cont. on page 3)

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor	Name	Case number (if known)	24-44875 (ESS)
		Valuation method used for current value	Current value of debtor's interest
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture (cont.)		
15.3	Name of Entity: JM Aiken LLC	% of ownership 100%	Unknown Undetermined
15.4	JM Astor Place Fitness LLC	100%	Unknown Undetermined
15.5	OTB1NY LLC	100%	Unknown Undetermined
15.6	HH Beaufort LLC	100%	Unknown Undetermined
15.7	Braintree Fitness LLC	100%	Unknown Undetermined
15.8	HH Holdco, Inc.	100%	Unknown Undetermined
15.9	HH Fitness Brookland LLC	100%	Unknown Undetermined
15.10	JM Irmo Fitness LLC	100%	Unknown Undetermined
15.11	JM Cleveland LLC	100%	Unknown Undetermined
15.12	Fitness Capital Ventures #2 LLC	100%	Unknown Undetermined
15.13	HH Accounts Payable, LLC	100%	Unknown Undetermined
15.14	JM Augusta LLC	100%	Unknown Undetermined
15.15	JM Florence LLC	100%	Unknown Undetermined
15.16	JM Arnold Creek LLC	100%	Unknown Undetermined
15.17	JM Gainesville LLC	100%	Unknown Undetermined
15.18	G3 Fitness Group DCII LLC	100%	Unknown Undetermined
15.19	3 Kings Holdings, LLC	100%	Unknown Undetermined
15.20	JM Irmo, LLC	100%	Unknown Undetermined
15.21	JM Kennesaw LLC	100%	Unknown Undetermined
15.22	BAMWestSpringfield LLC	100%	Unknown Undetermined
15.23	LV Fitness Flamingo LLC	100%	Unknown Undetermined
15.24	JM South Waterfront LLC	100%	Unknown Undetermined
15.25	JM Special Venue LLC	100%	Unknown Undetermined
15.26	Interval Zone Fitness LLC	100%	Unknown Undetermined
15.27	JM Valdosta LLC	100%	Unknown Undetermined
15.28	JM Lexington LLC	100%	Unknown Undetermined
15.29	HH Fitness Thomas Circle LLC	100%	Unknown Undetermined
15.30	HH Fitness Statesboro LLC	100%	Unknown Undetermined
15.31	HH Fitness Seven Corners LLC	100%	Unknown Undetermined
15.32	JM Simpsonville LLC	100%	Unknown Undetermined
15.33	JM Waterfront LLC	100%	Unknown Undetermined

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture (cont.)

	Name of Entity:	% of ownership	Valuation method used for current value	Current value of debtor's interest
15.34	JM Spartanburg Fitness LLC	100%	Unknown	Undetermined
15.35	OTLV2, LLC	100%	Unknown	Undetermined
15.36	Chikara Fitness, LLC	100%	Unknown	Undetermined
15.37	Gojiberry, LLC	100%	Unknown	Undetermined
15.38	HH Fitness Carson City LLC	100%	Unknown	Undetermined
15.39	HH Lynchburg, LLC	100%	Unknown	Undetermined
15.40	Honors Holding Management, LLC	100%	Unknown	Undetermined
15.41	JM Marietta Holdings, LLC	100%	Unknown	Undetermined
15.42	JM Soho LLC	100%	Unknown	Undetermined
15.43	VVDC, LLC	100%	Unknown	Undetermined
15.44	JM Vancouver Waterfront LLC	100%	Unknown	Undetermined
15.45				
15.46				
15.47				
15.48				
15.49				
15.50				
15.51				
15.52				
15.53				
15.54				
15.55				
15.56				
15.57				
15.58				
15.59				
15.60				
15.61				
15.62				
15.63				
15.64				

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.
 Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

_____ MM / DD / YYYY \$ _____ \$ _____

20. Work in progress

_____ MM / DD / YYYY \$ _____ \$ _____

21. Finished goods, including goods held for resale

_____ MM / DD / YYYY \$ _____ \$ _____

22. Other inventory or supplies

_____ MM / DD / YYYY \$ _____ \$ _____

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$ _____

24. Is any of the property listed in Part 5 perishable?

No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No
 Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops—either planted or harvested

_____ \$ _____ \$ _____

29. Farm animals Examples: Livestock, poultry, farm-raised fish

_____ \$ _____ \$ _____

30. Farm machinery and equipment (Other than titled motor vehicles)

_____ \$ _____ \$ _____

31. Farm and fishing supplies, chemicals, and feed

_____ \$ _____ \$ _____

32. Other farming and fishing-related property not already listed in Part 6

_____ \$ _____ \$ _____

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**

No

Yes. Is any of the debtor's property stored at the cooperative?

No

Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

No

Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. **Is a depreciation schedule available for any of the property listed in Part 6?**

No

Yes

37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**

No

Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

No. Go to Part 8.

Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. **Office furniture**

Tables and Chairs \$ 0 _____ \$ 0 _____

40. **Office fixtures**

_____ \$ _____ \$ _____

41. **Office equipment, including all computer equipment and communication systems equipment and software**

_____ \$ _____ \$ 0 _____

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1 _____ \$ _____ \$ _____

42.2 _____ \$ _____ \$ _____

42.3 _____ \$ _____ \$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$0.00 _____

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

No

Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

No

Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)			

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 2023 Kia Stinger - VIN KNAE35LD2P6130133	\$ 30,000.00	Kelley Blue Book	\$ 30,000
47.2	\$ _____	_____	\$ _____
47.3	\$ _____	_____	\$ _____
47.4	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1	\$ _____	_____	\$ _____
48.2	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1	\$ _____	_____	\$ _____
49.2	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

	\$ _____	_____	\$ _____
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51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ 30,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Part 9: Real property**54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 120 Interstate North Parkway SE, Atlanta, GA 30339 - office	Leasehold Interest	\$ N/A	N/A	\$ 0.00
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

No. Go to Part 11.
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____
66. Total of Part 10.	\$ 0.00		

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.
 Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

Description (include name of obligor)

_____ - Total face amount _____ = → \$ _____ doubtful or uncollectible amount _____

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____ Tax year _____ \$ _____
 _____ Tax year _____ \$ _____
 _____ Tax year _____ \$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____
Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____
Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

_____ \$ _____
 _____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

_____ \$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Part 12:

Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 0.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 6,666.81	
82. Accounts receivable. Copy line 12, Part 3.	\$ 0.00	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 0.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 30,000.00	
88. Real property. Copy line 56, Part 9.	\$ 0.00	\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.		
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 36,666.81	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 36,666.81

Fill in this information to identify the case:

Debtor name Honors Holdings, LLC
United States Bankruptcy Court for the: Eastern District of NY
(State)
Case number (If known): 24-44875 (ESS)

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 Creditor's name

WhiteHorse Capital Management, LLC

Describe debtor's property that is subject to a lien

All assets of the Debtor.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

\$ not less than \$44,411,461.46

\$ _____

Creditor's mailing address

1450 Brickell Ave, 31st Fl.

Miami, FL 33131

Describe the lien

Secured

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.2 Creditor's name

Describe debtor's property that is subject to a lien

\$ _____

\$ _____

Creditor's mailing address

Describe the lien

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Yes. The relative priority of creditors is specified on lines _____

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ not less than 44,411,461.46

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
• Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2. Creditor's name**Describe debtor's property that is subject to a lien****Creditor's mailing address**

\$ _____ \$ _____

Creditor's email address, if known**Describe the lien****Date debt was incurred****Last 4 digits of account number****Is the creditor an insider or related party?**

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.

 Yes. The relative priority of creditors is specified on lines _____

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

2. Creditor's name**Describe debtor's property that is subject to a lien****Creditor's mailing address**

\$ _____ \$ _____

Creditor's email address, if known**Describe the lien****Date debt was incurred****Last 4 digits of account number****Is the creditor an insider or related party?**

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.

 Yes. The relative priority of creditors is specified on lines _____

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Fill in this information to identify the case:

Debtor Honors Holdings, LLC

United States Bankruptcy Court for the: Eastern District of NY
(State)

Case number 24-44875 (ESS)
(If known)

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	As of the petition filing date, the claim is: \$ _____ <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$ _____
2.2 Priority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	As of the petition filing date, the claim is: \$ _____ <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$ _____
2.3 Priority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	As of the petition filing date, the claim is: \$ _____ <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$ _____

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2. <input type="checkbox"/> Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____	\$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			
2. <input type="checkbox"/> Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____	\$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			
2. <input type="checkbox"/> Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____	\$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			
2. <input type="checkbox"/> Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____	\$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 575 Worcester Road LLC c/o Crosspoint Associates Inc 188 Needham Street, Suite 255 Newton, MA 02464	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Lease guarantee
		\$ N/A
	Date or dates debt was incurred 02/03/2022	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.2	Nonpriority creditor's name and mailing address 640 PHP, LLC Attn: Jon Gallant 6400 Powers Ferry Road, Suite 350 Atlanta, GA 30339	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Lease guarantee
		\$ N/A
	Date or dates debt was incurred 04/23/2019	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.3	Nonpriority creditor's name and mailing address Beaufort Plaza, Inc 608 Bladen Street Beaufort, SC 29902	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Lease guarantee
		\$ N/A
	Date or dates debt was incurred 06/15/2022	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.4	Nonpriority creditor's name and mailing address Block 8 Investment, LLC 915 W 11th Street Vancouver, WA 98660	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Lease guarantee
		\$ N/A
	Date or dates debt was incurred 01/23/2020	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.5	Nonpriority creditor's name and mailing address BOTF, LLC 21014 Cisco Lane Leesburg, VA 20175	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Alleged breach of contract claim
		\$ N/A
	Date or dates debt was incurred _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.6	Nonpriority creditor's name and mailing address Braintree Property Associates LP c/o M.S. Management Associates 225 West Washington Street Indianapolis IN 46204	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Lease guarantee
		\$ N/A
	Date or dates debt was incurred 12/31/2019	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address Branch Gainesville Associates, LP 3340 Peachtree Road, Suite 600 Atlanta, GA 30326	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>08/27/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.8	Nonpriority creditor's name and mailing address CA 531 86th Street LLC 1412 Broadway, 3rd Floor New York, NY 10016	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>05/06/2022</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.9	Nonpriority creditor's name and mailing address Carson Valley Center, LLC 211 North Stadium Boulevard, Suite 201 Columbia, MO 65203	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>10/18/2022</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.10	Nonpriority creditor's name and mailing address CV South, LLC 1414 Atwood Avenue Johnston, RI 02919	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>02/18/2016</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.11	Nonpriority creditor's name and mailing address DDR Prado, LLC 3300 Enterprise Parkway Beachwood, OH 44122	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>07/14/2015</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12	Nonpriority creditor's name and mailing address E-Grand Ventures LLC c/o Logic Commercial Real Estate 8918 Spanish Ridge Ave, #100 Las Vegas, NV 89148	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>12/01/2016</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.13	Nonpriority creditor's name and mailing address ERP Hillcrest, LLC c/o Brixmor Property Group 450 Lexington Avenue, 13th Floor New York, NY 10017	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>05/31/2018</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.14	Nonpriority creditor's name and mailing address FMH, LLC 8816 Six Forks Road, Suite 201 Raleigh, NC 27615	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>06/28/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.15	Nonpriority creditor's name and mailing address J & R Atwater Condo LLC 2525 Main Street, Suite S10 Irvine, CA 92614	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>04/15/2016</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		
3.16	Nonpriority creditor's name and mailing address JHR Holdings, LLC c/o Brookside Properties Inc 2002 Richard Jones Road, Suite 200C Nashville, TN 37215	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: <u>Lease guarantee</u>	
	Date or dates debt was incurred <u>08/02/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <u>_____</u>		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.17	Nonpriority creditor's name and mailing address Joseph and Geraldine Dehorty Living Trust and Frank and Caroline Hines PO Box 93778 Las Vegas, NV 89193	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ N/A
	Date or dates debt was incurred 09/01/2016	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.18	Nonpriority creditor's name and mailing address JSM Associates I LLC c/o Edward J Minskoff Equities 1325 Avenue of the Americas New York, NY 10019	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
	Date or dates debt was incurred 05/16/2016	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.19	Nonpriority creditor's name and mailing address Loren Tampa, LLC (fka Arlington Apartments Holdings LLC) 6410 Arlington Blvd Falls Church, VA 22042	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
	Date or dates debt was incurred 05/06/2019	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.20	Nonpriority creditor's name and mailing address Monroe Street Block B Retail, LLC c/o The Bozzuto Group 6406 Ivy Lane, Suite 400 Greenbelt, MD 20770	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
	Date or dates debt was incurred 11/12/2019	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.21	Nonpriority creditor's name and mailing address New Market – East Gate, LLC c/o New Market Properties 3284 Northside Pkwy, Suite 515 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
	Date or dates debt was incurred 06/30/2021	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.22	Nonpriority creditor's name and mailing address New Market – Fairview, LLC c/o New Market Properties 3284 Northside Pkwy, Suite 515 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ N/A
		Basis for the claim: Lease guarantee	
	Date or dates debt was incurred 12/13/2019	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.23	Nonpriority creditor's name and mailing address New Market – Irmo, LLC c/o New Market Properties 3284 Northside Pkwy, Suite 515 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: Lease guarantee	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.24	Nonpriority creditor's name and mailing address Robert Scot James dba Core2000 LLC 875 Siesta Key Circle Sarasota, FL 34342	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: Alleged breach of contract claim	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.25	Nonpriority creditor's name and mailing address Springfield Plaza, LLC c/o Rappaport Management Company 8405 Greensboro Drive, 8th Floor McLean, VA 22102	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: Lease guarantee	
	Date or dates debt was incurred 09/17/2019	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.26	Nonpriority creditor's name and mailing address The Realty Associates Fund XI Portfolio, L.P. c/o MRP Real Estate Services Group 3050 K Street NW, Suite 125 Washington, DC 20007	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: Lease guarantee	
	Date or dates debt was incurred 10/15/2018	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.27	Nonpriority creditor's name and mailing address Virginia Gateway Promenade LLC 12500 Fair Lakes Circle, Suite 400 Fairfax VA 22033	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ N/A
		Basis for the claim: Lease guarantee	
	Date or dates debt was incurred 12/17/2015	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.28	Nonpriority creditor's name and mailing address W/S Smithfield Associates, LLC c/o WS Asset Management, Inc 33 Boylston Street Suite 3000 Chestnut Hill, MA 02467	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ N/A
		Basis for the claim: Lease guarantee	
	Date or dates debt was incurred 08/16/2022	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.	Nonpriority creditor's name and mailing address _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.	Nonpriority creditor's name and mailing address Springfield Plaza, LLC c/o Rappaport Management Company _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3.	Nonpriority creditor's name and mailing address _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Last 4 digits of account number _____		

Part 3:**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	Seyfarth Shaw LLP 560 Mission Street, Suite 3100 San Francisco, CA 94105	Line 3.5 <input type="checkbox"/> Not listed. Explain _____	_____
4.2.	Seyfarth Shaw LLP 560 Mission Street, Suite 3100 San Francisco, CA 94105	Line 3.8 <input type="checkbox"/> Not listed. Explain _____	_____
4.3.	Seyfarth Shaw LLP 560 Mission Street, Suite 3100 San Francisco, CA 94105	Line 3.24 <input type="checkbox"/> Not listed. Explain _____	_____
4.4.	Law Offices of John Benedict 2190 East Pebble Road, Suite 260 Las Vegas, NV 89123	Line 3.17 <input type="checkbox"/> Not listed. Explain _____	_____
4.1.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.5.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.6.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.7.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.8.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.9.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.10.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.11.		Line _____ <input type="checkbox"/> Not listed. Explain _____	_____

Part 3: Additional Page for Others to Be Notified About Unsecured Claims

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a.

Total of claim amounts

\$ 0.00

5b. Total claims from Part 2

5b.

+

\$ N/A

5c. Total of Parts 1 and 2

5c.

Lines 5a + 5b = 5c.

\$ N/A

Fill in this information to identify the case:

Debtor name Honors Holdings, LLC
United States Bankruptcy Court for the: Eastern District of NY
Case number (If known): 24-44875 (ESS) Chapter 7

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Real Estate Lease	Albany Road-120 Interstate North LLC c/o Albany Road Real Estate Partners LLC 201 4th Avenue North, Suite 1250 Nashville, TN 37219 Attn: Brandon Hoag
	State the term remaining	10/31/2026	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. <input type="checkbox"/>	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Fill in this information to identify the case:

Debtor name Honors Holdings, LLC
United States Bankruptcy Court for the: Eastern District of NY
(State)
Case number (If known): 24-44875 (ESS)

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor			Column 2: Creditor	
	Name	Mailing address	Name	Check all schedules that apply:
2.7	JM Irmo Fitness LLC	7467 St. Andrews Road Street Suite 7B Irmo SC 29063 City State ZIP Code	Whitehorse Capital Management LLC New Market - Irmo, LLC	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.8	JM Kennesaw, LLC	2555 Prado Lane Street Suite 1400 Marietta GA 30066 City State ZIP Code	Whitehorse Capital Management LLC DDR Prado, LLC	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.9	JM Marietta, LLC	1750 Powder Springs Road SW Street Suite 270 Marietta GA 30064 City State ZIP Code	Whitehorse Capital Management LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10	JM NE Columbia LLC	10296 Two Notch Road Street Suite 2 Columbia SC 29229 City State ZIP Code	Whitehorse Capital Management LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11	JM Pearl District, LLC	1010 NW Everett Street Street Suite 127 Portland OR 97209 City State ZIP Code	Whitehorse Capital Management LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12	JM Spartanburg Fitness LLC	Street City State ZIP Code	Whitehorse Capital Management LLC ERP Hillcrest, LLC	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.13	VVDC Lawrenceville, LLC	Street City State ZIP Code	Whitehorse Capital Management LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.14	JM Special Venue LLC	1 Southwest Bowerman Drive Street Beaverton OR 97005 City State ZIP Code	Whitehorse Capital Management LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor			Column 2: Creditor	
	Name	Mailing address	Name	Check all schedules that apply:
2.15	JM Aiken, LLC	250 East Gate Dr Street Suite 238 Aiken SC 29803 City State ZIP Code	New Market - East Gate, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.16	JM Astor Place Fitness LLC	51 Astor Place Street New York NY 10003 City State ZIP Code	JSM Associates I LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.17	OTB1NY LLC	8508 3rd Ave Street Brooklyn NY 11209 City State ZIP Code	CA 531 86th Street LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.18	HH Beaufort LLC	23 Robert Smalls Pkwy Street Beaufort SC 29906 City State ZIP Code	Beaufort Plaza, Inc.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.19	Braintree Fitness LLC	250 Granite Street Street Suite 2118 Braintree MA 02184 City State ZIP Code	Braintree Property Associates LP	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.20	HH Fitness Brookland LLC	655 Monroe St NE B3 Street Washington DC 20017 City State ZIP Code	Monroe Street Block Retail, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.21	HH Carson City LLC	Street City State ZIP Code	Carson Valley Center, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.22	Fitness Capital Ventures # 2 LLC	4 Chapel View Blvd. Street Cranston RI 02920 City State ZIP Code	CV South, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor			Column 2: Creditor	
	Name	Mailing address	Name	Check all schedules that apply:
2.23	JM Florence, LLC	1901 W Palmetto St Street Suite 20 Florence SC City State ZIP Code	FMH, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.24	Bish Five LLC	571 Worcester Road Street Framingham MA 01701 City State ZIP Code	575 Worcester Road LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.25	HH Fitness Seven Corners LLC	6410 Arlington Blvd Street Falls Church VA 22042 City State ZIP Code	Loren Tampa, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.26	JM Gainesville, LLC	833 Dawsonville Hwy Street Suite 220 Gainesville GA 30501 City State ZIP Code	Branch Gainesville Associates, LC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.27	JM Simpsonville, LLC	655 Fairview Rd Street Suite C-2 Simpsonville SC 29680 City State ZIP Code	New Market - Fairview, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.28	HH Fitness Thomas Circle LLC	1101 14th St NW Street Washington DC 20005 City State ZIP Code	The Realty Associates Fund XI Portfolio, L.P.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.29	JM Valdosta, LLC	3268 Inner Perimeter Rd Street Suite B Valdosta GA 31602 City State ZIP Code	JHR Holdings, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.30	JM Vancouver Waterfront, LLC	741 W Columbia Way Street Vancouver WA 98660 City State ZIP Code	Block 8 Investment, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor			Column 2: Creditor	
	Name	Mailing address	Name	Check all schedules that apply:
2.31	LV Fitness Flamingo, LLC	4245 South Grand Canyon Drive Street Unit 109 Las Vegas NV 89147 City State ZIP Code	E-Grand Ventures LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.32	BAMWest Springfield LLC	7271 Commerce Street Street Springfield VA 22150 City State ZIP Code	Springfield Plaza, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.		Street City State ZIP Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.		Street City State ZIP Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.		Street City State ZIP Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.		Street City State ZIP Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.		Street City State ZIP Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.		Street City State ZIP Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Honors Holdings, LLC

United States Bankruptcy Court for the: Eastern District of NY
(State)

Case number (If known): 24-44875 (ESS)

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*.....

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*.....

\$ 36,666.81

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*.....

\$ 36,666.81

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

not less than
\$44,114,461.46

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$ _____

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$ N/A

4. **Total liabilities**.....

Lines 2 + 3a + 3b

not less than
\$44,114,461.46

Fill in this information to identify the case and this filing:

Debtor Name Honors Holdings, LLC
United States Bankruptcy Court for the: Eastern District of NY
(State)
Case number (If known): 24-44875 (ESS)

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule* _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration* _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/07/2025
MM / DD / YYYY

 /s/ G. Grant Lyon

Signature of individual signing on behalf of debtor

G. Grant Lyon

Printed name

Independent Manager

Position or relationship to debtor